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Blakely Sokol- Taylor & Zafma 7th Floor 12400 Wilshire	off an	3/2009	l h Sta ade tra:	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
Los Angeles, Ca						(Depositor's name)
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						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	₹	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/511,690 10/14/2004			Kenji Suzuki 96790P469 9175		9175	
TITLE OF INVENTI	ION: WIRELESS CO ETHOD, WIRELESS T	MMUNICATION SYS RANSMISSION METHO	TEM, WIRELESS TR DD AND WIRELESS REC	ANSMITTER, WIF CEPTION METHOD	RELESS RECEIVER, V	VIRELESS
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUI	E DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	06/25/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS			
VLAHOS.	, SOPHIA	2611	375-130000	_		
1. Change of correspondence address or indication of "Fee Address" (3° CFR 1.363)  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Unl recordation as set fortl (A) NAME OF ASSIG	ess an assignee is ident h in 37 CFR 3.11. Comp GNEE	ified below no assignee	(B) RESIDENCE: (CITY	atent. If an assignee assignment.	OUNTRY)	document has been filed for
Please check the appropri	ate assignee category or	categories (will not be pr	inted on the patent):	Individual 🔀 Corp	poration or other private gro	oup entity Government
4a. The following fee(s) are submitted:    State   Issue   Iss			4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number ☐ ☐ ☐ (enclose an extra copy of this form).			
	s SMALL ENTITY statu		☐ b. Applicant is no lone	ger claiming SMALI	ENTITY status. See 37 C	FR 1.27(α)(2)
	Publication Fee (if requ	ired) will not be accented	from anyone other than t	he applicant; a registe	ered attorney or agent; or th	ne assignce or other party in
Authorized Signature		945	Office.	Date 5	14/09	
Typed or printed name Eric S. Hyman		ian /	Registration No. 30,139			
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